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## FEC FORM 3P

## REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

NAME OF COMMITTEE (in full, type or print)				he lines 12FE4	ME
	ypo or printy	Example: I	f typing, type over t	he lines.	MO
SCOTT WALKER INC					1
ADDRESS (number and days all)					
ADDRESS (number and street)) PO B	OX 620590				
Check if different   than previously  MIDE	DLETON		ı WI ı	53562	
reported. (ACC					
	CIT		STATE		CODE
2. FEC IDENTIFICATION NUMBER C C00580480 3. THIS REPORT IS FOR Primary or General					
4. TYPE OF REPORT (Choose One)		Check here if this is a Termination Report (TER)			
Quarterly Reports:		Monthly Reports:			
April 15 (Q1) October 15 (Q3	s)	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11)
	r-End Report (YE)	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12)
	,	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10))	Jan 31 (YE)
		Apr 20 (W4)	Jul 20 (W//)	Oct 20 (W10))	Jan 31 (1L)
Thirtieth day report following the General Election on in the State of					election election
Is this Report an Amendment?	X no				
5. Covering Period 10	01 / 2015	through	12 / 31	2015	Y
I certify that I have examined this Repo	rt and to the best of m	y knowledge and b	elief it is true, corre	ct and complete.	
KAT	E LIND				
Type or Print Name of Treasurer					
Signature of Treasurer  KATE LIND		[Electronical	ly Filed] Date	01 / 29	2016
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.  All previous versions of this form are obsolete and should no longer be used.					
Office					
Use Only					